	_	PART B	- FEE(S)	TRANSMITTAL		
Complete and send	this form, together wit	h applicable f	ee(s), to: <u>M</u> or <u>I</u>	P.O. Box 1450 Alexandria, Vir	E FEE for Patents ginia 22313-1450	
maintenance fee notificatio	ns.			PUBLICATION FEE (if req fication of maintenance fees a new correspondence addres	uired). Blocks 1 through 5 will be mailed to the curren s; and/or (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for
01333 7 BETH READ	CE ADDRESS (Note: Use Block 1 for 590 01/19/2006	any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimilating transmitted to the USPTO (571) 273-2885, on the date indicated below.			
PATENT LEGAL EASTMAN KODA 343 STATE STRE ROCHESTER, NY	AK COMPANY ET			States Postal Service addressed to the Matransmitted to the US	with sufficient postage for fi ail Stop ISSUE FEE addres PTO (571) 273-2885, on the	d (Denositor's name)
				<u> </u>	pric () 121	200
APPLICATION NO.	FILING DATE		FIRST NAME	O INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/695,035 10/28/2003 Arkady Ten				y Ten	01233US (EKC 89966)	MGB 5668
FITLE OF INVENTION: D	DISPLAY DEVICE LIGHT L	EAKAGE COMP	ENSATION			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	04/19/2006
EXAMINER		ART UN	JNIT CLASS-SUBCLASS			
RAHMJOO, MANUCHER		2676	2676 345-589000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT	(print or type)		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. 04/11/2006 MAHMED2 00000045 10695035						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
EASTMAN KODAK COMPANY 02 FC:1501 1400.00 OP 300.00 OP 343 STATE STREET, ROCHESTER, NY 14650-2201						
343 STATE ST	REEI, RUCHESTER, N	1 14000-220	i Industria	Dr. at. a b	/ 	i
	e assignee category or categor				Corporation or other private g	roup entity Government
ta. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.						
Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies The Director is hereby authorized by charge the required fee(s), or credit any overpayment, Deposit Account Number (enclose an extra copy of this form).						
_ ~ .	(from status indicated above	•	□ h Applic	ant is no longer claiming SMA	ALL ENTITY status See 37 (CER 1 27(a)(2)
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in neterst as shown by the records of the United States Patent and Trademark Office. Authorized Signature Mark 6. Bocchett Typed or printed name Mark 6. Bocchett Registration No. 31, 330						
Typed or printed name _	Mark 6. Bocc	ketti	//	Registratio	n No. 3/. 330	2
	•					

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.